

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

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WS-04247A
Sunrise Utilities, L.L.C.
PO Box 3630
Mesquite, NV 89024

RECEIVED

APR 13 2007

12 CORP COMM
Director Utilities

ANNUAL REPORT

FOR YEAR ENDING

12	31	2006
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FOR COMMISSION USE

ANN 04	06
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PROCESSED BY:

4-2307

SCANNED

COMPANY INFORMATION

Company Name (Business Name) <u>SUNRISE UTILITIES, LLC</u>			
Mailing Address <u>P.O. BOX 3630</u>			
<u>MESQUITE</u> (City)		<u>NV</u> (State)	<u>89024</u> (Zip)
<u>(702) 346-2280</u> Telephone No. (Include Area Code)	<u>(702)</u> Fax No. (Include Area Code)	 Pager/Cell No. (Include Area Code)	
Email Address _____			
Local Office Mailing Address _____			
 (City)		 (State)	 (Zip)
 Local Office Telephone No. (Include Area Code)	 Fax No. (Include Area Code)	 Pager/Cell No. (Include Area Code)	
Email Address _____			

MANAGEMENT INFORMATION

Management Contact: <u>GEORGE TIMINSKAS</u> (Name)		<u>GENERAL MANAGER</u> (Title)	
<u>P.O. BOX 3630</u> (Street)		<u>MESQUITE</u> (City)	<u>NV</u> (State)
<u>(702) 346-2280</u> Telephone No. (Include Area Code)		<u>89024</u> (Zip)	 Pager/Cell No. (Include Area Code)
Email Address _____			
On Site Manager: <u>N/A</u> (Name)			
 (Street)		 (City)	 (State)
 Telephone No. (Include Area Code)		 Fax No. (Include Area Code)	 Pager/Cell No. (Include Area Code)
Email Address _____			

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: Margaret Mc Lees
(Name)
5000 Arundin Littlefield AZ 86432
(Street) (City) (State) (Zip)

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Pager/Cell No. (Include Area Code)

Attorney: Richard S. Ilguist
(Name)

4500 S. Lakeshore Dr. St. 339 Tempe, AZ 85282
(Street) (City) (State) (Zip)

(480) 839-5205 (480) 345-0412
Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

OWNERSHIP INFORMATION

Check the following box that applies to your company:

- | | |
|---|---|
| <input type="checkbox"/> Sole Proprietor (S) | <input type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P) | <input type="checkbox"/> Subchapter S Corporation (Z) |
| <input type="checkbox"/> Bankruptcy (B) | <input type="checkbox"/> Association/Co-op (A) |
| <input type="checkbox"/> Receivership (R) | <input checked="" type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Other (Describe) _____ | |

COUNTIES SERVED

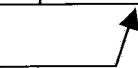
Check the box below for the county/ies in which you are certificated to provide service:

- | | | |
|-------------------------------------|-----------------------------------|--|
| <input type="checkbox"/> APACHE | <input type="checkbox"/> COCHISE | <input type="checkbox"/> COCONINO |
| <input type="checkbox"/> GILA | <input type="checkbox"/> GRAHAM | <input type="checkbox"/> GREENLEE |
| <input type="checkbox"/> LA PAZ | <input type="checkbox"/> MARICOPA | <input checked="" type="checkbox"/> MOHAVE |
| <input type="checkbox"/> NAVAJO | <input type="checkbox"/> PIMA | <input type="checkbox"/> PINAL |
| <input type="checkbox"/> SANTA CRUZ | <input type="checkbox"/> YAVAPAI | <input type="checkbox"/> YUMA |
| <input type="checkbox"/> STATEWIDE | | |

UTILITY PLANT IN SERVICE

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
301	Organization	45,006.39	0.00	45,006.39
302	Franchises	500.00	0.00	500.00
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	45,506.39	0.00	45,506.39

This amount goes on the Balance Sheet Acct. No. 108



CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization	45,006.39	.20	9,000.00
302	Franchises	500.00	.08	40.00
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	45,506.39		9,040.00

This amount goes on the Comparative Statement of Income and Expense _____
 Acct. No. 403.

BALANCE SHEET

Acct No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	ASSETS		
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$0.00	\$238.66
134	Working Funds	0.00	0.00
135	Temporary Cash Investments	0.00	0.00
141	Customer Accounts Receivable	0.00	0.00
146	Notes/Receivables from Associated Companies	0.00	0.00
151	Plant Material and Supplies	0.00	0.00
162	Prepayments	0.00	0.00
174	Miscellaneous Current and Accrued Assets	0.00	0.00
	TOTAL CURRENT AND ACCRUED ASSETS	\$0.00	\$238.66
	FIXED ASSETS		
101	Utility Plant in Service	0.00	\$45,506.39
103	Property Held for Future Use	0.00	0.00
105	Construction Work in Progress	0.00	0.00
108	Accumulated Depreciation – Utility Plant	0.00	9,040.00
121	Non-Utility Property	0.00	0.00
122	Accumulated Depreciation – Non Utility	0.00	0.00
	TOTAL FIXED ASSETS	0.00	\$36,466.39
	TOTAL ASSETS	\$0.00	\$36,705.05

NOTE: The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	LIABILITIES		
	CURRENT LIABILITES		
231	Accounts Payable	\$0.00	\$0.00
232	Notes Payable (Current Portion)	0.00	0.00
234	Notes/Accounts Payable to Associated Companies	0.00	0.00
235	Customer Deposits	0.00	0.00
236	Accrued Taxes	0.00	0.00
237	Accrued Interest	0.00	0.00
241	Miscellaneous Current and Accrued Liabilities	0.00	0.00
	TOTAL CURRENT LIABILITIES	\$0.00	\$0.00
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$0.00	\$0.00
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$0.00	\$0.00
252	Advances in Aid of Construction	0.00	0.00
255	Accumulated Deferred Investment Tax Credits	0.00	0.00
271	Contributions in Aid of Construction	0.00	0.00
272	Less: Amortization of Contributions	0.00	0.00
281	Accumulated Deferred Income Tax	0.00	0.00
	TOTAL DEFERRED CREDITS	\$0.00	\$0.00
	TOTAL LIABILITIES	\$0.00	\$0.00
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$0.00	\$0.00
211	Paid in Capital in Excess of Par Value	0.00	
215	Retained Earnings	0.00	(9,040.00)
218	Proprietary Capital (Sole Props and Partnerships)	0.00	45,745.05
	TOTAL CAPITAL	0.00	\$36,705.05
	TOTAL LIABILITIES AND CAPITAL	\$0.00	\$36,705.05

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$0.00	\$0.00
460	Unmetered Water Revenue	0.00	0.00
474	Other Water Revenues	0.00	0.00
	TOTAL REVENUES	\$0.00	\$0.00
	OPERATING EXPENSES		
601	Salaries and Wages	\$0.00	\$0.00
610	Purchased Water	0.00	0.00
615	Purchased Power	0.00	0.00
618	Chemicals	0.00	0.00
620	Repairs and Maintenance	0.00	0.00
621	Office Supplies and Expense	0.00	0.00
630	Outside Services	0.00	0.00
635	Water Testing	0.00	0.00
641	Rents	0.00	0.00
650	Transportation Expenses	0.00	0.00
657	Insurance – General Liability	0.00	0.00
659	Insurance - Health and Life	0.00	0.00
666	Regulatory Commission Expense – Rate Case	0.00	0.00
675	Miscellaneous Expense	0.00	0.00
403	Depreciation Expense	0.00	9,040.00
408	Taxes Other Than Income	0.00	0.00
408.11	Property Taxes	0.00	0.00
409	Income Tax	0.00	0.00
	TOTAL OPERATING EXPENSES	0.00	\$9,040.00
	OPERATING INCOME/(LOSS)	0.00	(\$9,040.00)
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$0.00	\$0.00
421	Non-Utility Income	0.00	0.00
426	Miscellaneous Non-Utility Expenses	0.00	0.00
427	Interest Expense	0.00	0.00
	TOTAL OTHER INCOME/(EXPENSE)	\$0.00	\$0.00
	NET INCOME/(LOSS)	\$0.00	(\$9,040.00)

SUPPLEMENTAL FINANCIAL DATA
Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End	\$
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Meter Deposits Refunded During the Test Year	\$
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NO DEBT ISSUED AS OF DECEMBER 31, 2006

COMPANY NAME	Sunrise Utilities, LLC
Name of System	ADEQ Public Water System Number (if applicable)

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	Sunrise Utilities, LLC
Name of System	ADEQ Public Water System Number (if applicable)

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS		
Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		

CUSTOMER METERS	
Size (in inches)	Quantity
5/8 X 3/4	
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Tubo 4	
Comp. 6	
Tubo 6	

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:

STRUCTURES:

OTHER:

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME Sunrise Utilities, LLC YEAR ENDING 12/31/2006

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2006 was: \$ 0.00

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. _____

No land in company name. _____

**VERIFICATION
AND
SWORN STATEMENT**
Taxes

RECEIVED

APR 19 2007

AZ CORP COMM
Director, Utilities

VERIFICATION

STATE OF AZ
I, THE UNDERSIGNED
OF THE

COUNTY OF (COUNTY NAME)	<u>Maricopa</u>
NAME (OWNER OR OFFICIAL) TITLE	<u>George Timinskas, Gen. Mgr</u>
COMPANY NAME	<u>Sunrise Utilities LLC</u>

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING


MONTH	DAY	YEAR
12	31	2006

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

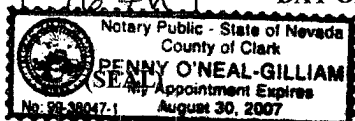

SIGNATURE OF OWNER OR OFFICIAL

(702) 346-2280
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

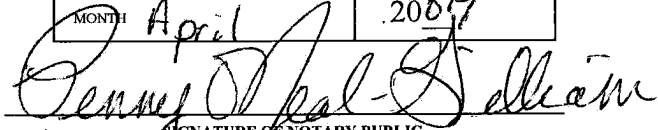
A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 16th DAY OF



MY COMMISSION EXPIRES Aug 30, 2007

COUNTY NAME	<u>Clark</u>	
MONTH	<u>April</u>	<u>2007</u>


SIGNATURE OF NOTARY PUBLIC

COMPANY NAME _____ Sunrise Utilities, LLC _____ **YEAR ENDING 12/31/2006**

INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported _____ 0.00 _____
Estimated or Actual Federal Tax Liability _____ 0.00 _____

State Taxable Income Reported _____ 0.00 _____
Estimated or Actual State Tax Liability _____ 0.00 _____

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances _____
Amount of Gross-Up Tax Collected _____ 0.00 _____
Total Grossed-Up Contributions/Advances _____

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

SIGNATURE

4/16/07

DATE

George Timinskas

PRINTED NAME

General Manager

TITLE

RECEIVED

APR 19 2007

**VERIFICATION
AND
SWORN STATEMENT
Intrastate Revenues Only**

AZ CORP COMM
Director Utilities

VERIFICATIONSTATE OF AZ

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)	<u>Mohave</u>
NAME (OWNER OR OFFICIAL) TITLE	<u>George Firzingskas Gen. Mgr</u>
COMPANY NAME	<u>Sunrise Utilities LLC</u>

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION**FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2006

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2006 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 0

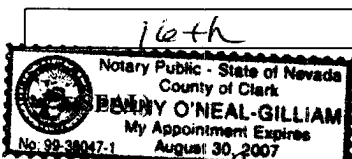
(THE AMOUNT IN BOX ABOVE
INCLUDES \$ 0
IN SALES TAXES BILLED, OR COLLECTED)

****REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)**

[Signature]
SIGNATURE OF OWNER OR OFFICIAL
(702) 346-2230
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME**A NOTARY PUBLIC IN AND FOR THE COUNTY OF**

THIS



DAY OF

COUNTY NAME	<u>Clark</u>
MONTH	<u>April</u>
YEAR	<u>2007</u>

MY COMMISSION EXPIRES Aug 30, 2007

[Signature]
SIGNATURE OF NOTARY PUBLIC

**VERIFICATION
AND
SWORN STATEMENT
RESIDENTIAL REVENUE**
Intrastate Revenues Only

RECEIVED

APR 19 2007

VZ CORP COMM
Director Utilities

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) <u>Mohave</u>	
NAME (OWNER OR OFFICIAL) <u>George Timinskas</u>	TITLE <u>General Manager</u>
COMPANY NAME <u>Sunrise Utilities LLC</u>	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
<u>12</u>	<u>31</u>	<u>2006</u>

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2006 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES

\$ 0

THE AMOUNT IN BOX AT LEFT
INCLUDES \$ 0
IN SALES TAXES BILLED, OR COLLECTED)

***RESIDENTIAL REVENUE REPORTED ON THIS PAGE
MUST INCLUDE SALES TAXES BILLED.**

George Timinskas
SIGNATURE OF OWNER OR OFFICIAL

(702) 346-2280
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

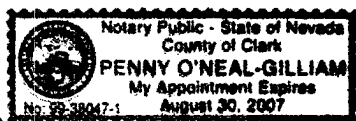
THIS

16th

DAY OF April

NOTARY PUBLIC NAME <u>Penny O'Neal-Gilliam</u>	
COUNTY NAME <u>Clark</u>	
MONTH <u>April</u>	<u>2007</u>

(SEAL)



MY COMMISSION EXPIRES

Aug 30, 2007

Penny O'Neal-Gilliam
SIGNATURE OF NOTARY PUBLIC